STATE OF INDIANA

**Request for Information 13-34**

INDIANA DEPARTMENT OF ADMINISTRATION

On Behalf of

Family & Social Services Administration
Division of Mental Health and Addiction

Solicitation For:
**Laboratory Services for**
**State Operated Facilities**

**Response Due Date: August 30, 2013**

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## SECTION ONE
## General Information

### 1.1 Introduction

This is a Request for Information (RFI) issued by the Indiana Department of Administration (IDOA) in conjunction with the Family and Social Services Administration (FSSA), Division of Mental Health and Addiction (DMHA). It is the intent of IDOA to solicit responses to this RFI in accordance with the statement of work and specifications contained in this document.

This RFI is only a request for information about potential services. Neither this RFI nor any response submitted hereto is to be construed as a legal offer. The State accepts no obligations for costs incurred by Respondents in anticipation of being awarded a contract.

### 1.2 Background

The Indiana Family & Social Services Administration (FSSA) administers medical and social services to over one million residents. The Division of Mental Health and Addiction (DMHA) of FSSA is responsible for integrating and funding a network of state staff, healthcare providers, and vendors who provide mental health and addiction services to qualified Indiana residents. DMHA is committed to ensuring that these recipients have access to quality services.

DMHA provides psychiatric care to approximately 800 individuals at six (6) State Operated Facilities (SOF):

| | |
|---|---|
| Larue D. Carter Memorial Hospital | Logansport State Hospital |
| Evansville Psychiatric Children's Center | Madison State Hospital |
| Evansville State Hospital | Richmond State Hospital |

Indiana's State Psychiatric Hospitals serve many roles in their respective communities. They are inpatient treatment units for those who need an intensive level of treatment; they are excellent research facilities for students and professionals in the fields of mental health and addiction; and they are good neighbors in their community. The state hospital system serves adults with mental illness (including adults who have co-occurring mental health and addiction issues, who are deaf or hearing impaired, and who have forensic involvement), and children and adolescents with serious emotional disturbances. Additional information about the State Psychiatric Hospitals can be found at the following website and in the fact sheets included in the supplemental attachments of this RFI: http://www.in.gov/fssa/dmha/4325.htm

In order to provide the most comprehensive care to patients, each SOF requires ongoing clinical laboratory services that provide hospital staff with a full range of clinical laboratory analysis. A detailed summary of the necessary laboratory services can be found in Section Two of this document.

### 1.3 Purpose

The Division of Mental Health and Addiction (DMHA) is developing the Scope of Work for a subsequent Request for Proposal (RFP) for the provision of clinical laboratory services. The purpose of this RFI is to collect information to formalize the RFP by allowing the provider community to apprise DMHA on information that should be considered as part of the scope of work.

As such, DMHA is interested in solutions or guidance from capable organizations to develop a mutually beneficial strategy for providing clinical laboratory services to the six (6) State Operated Facilities at a reasonable cost to the State. Proposed solutions must take into consideration the services and minimum deliverables detailed in Section Two of this document. Information submitted in response to this RFI will be used for the sole purpose of developing a comprehensive RFP scope of work; it shall not be disclosed to any other party. All RFI respondents will be notified of the issuance of the subsequent Lab Services RFP.

**SECTION TWO**
**Description of Minimum Deliverables**

Section 2.1 provides a listing of commonly ordered bundled tests or panels from the State Operated Facilities. Understand that the average volumes, while they are based on historical data, will vary based on hospital population, patient acuity, and physician ordering practices. Also, note that while this is an average volume by location, there is a great variance from one hospital to the next. By contrast, Section 2.2 provides the most commonly ordered lab tests and the volumes by State Operated Facility over a 12 month period.

### 2.1 Types of Procedures/Sticks/Analysis

| Name of Lab | Average Volume (per location) |
|---|---|
| Hematology* (complete blood count plus differential "CBC Plus Diff" includes: WBC, RBC, Hgb, HCT, Platelet count, RBC indices, 5 part differential and ANC. Reticulocyte count, Sedimentation Rate) | 165 |
| General Health Profile* (chem panels for a Comprehensive Metabolic panel-Albumin, Alk Phos, ALT (SGOT), Total Bilirubin, BUN, Total Calciu, Chloride, Creatinine, Glucose Potassium, Total Protein, Sodium and a TCO2. Lipid panel-total cholesterol, Triglycerides, HDL, Calculated LDL, LDL/cholesterol Ration, and a Risk Ration. Also inluces a TSH) | 145 |
| Therapeutic Drug Levels (TDM)* (Clozapine, Dilantin, Lithium, Phenobarbital, Tegretol, Valporic Acid) | 95 |
| Urinalysis Testing and Urine/Serum Qualitative Pregnancy Testing* (microscopic and macroscopic urine testing) | 55 |
| Chemistry Testing* (Ammonia Level, ANA, ASO, CRP, Ferritin, Folate, Hemoglobin A1C, Iron/IBC, Magnesium, Prolactin, PSA Screen, RA Factor, T3, T4 Total, TSH, Vitamin B12, Vitamin D and Uric Acid) | 55 |
| Coagulation Studies* (PT/INR AND A PTT and Ratio) | 20 |
| Hepatitis, HIV Screen and Serology Testing (Hepatitis B and C, Hep A Ab-IgM, Hepatitis B Surface Ab, Hep B Core Ab-IgM, Anti HCV, Hepatitis C Virus Ab, HIV 1 RNA Qnt and RPR) | 20 |
| Microbiology (Fecal Occult Blood Screen, Chlamydia/Neisseria Gonorrhea SDA, Gential Culture (vaginal), gram Stain, MRSA Screen, Ova & Parasite Stool, Rapid Flue A&B, NP Swab, Rapid Strep A, Throat (quick), stool culture, throat culture, urine culture & colony count and wound cultures) | 10 |
| Hepatic Function Panel (LFT)* (Albumin, Alk Phos, ALT (SGPT), AST (SGOT), Total and Direct Bilirubin, and a total Protein) | 5 |

## 2.2 Volume/Frequency of Performance

| Logansport State Hospital | Volume |
|---|---|
| UA | 585 |
| CBC | 453 |
| Atypical Protocol | 232 |
| DEPAKOTE LEVEL | 224 |
| A1C | 200 |
| MICROALBUMIN | 185 |
| Admission Labs | 129 |
| CPK | 127 |
| TEG LEVEL | 96 |
| LIPID | 83 |

| Evansville State Hospital | Volume |
|---|---|
| CBC Auto Diff DHS | 1277 |
| Lipid Profile DHS | 403 |
| Comp metabolic profile DHS | 475 |
| TSH, 3rd generation DHS | 334 |
| Basic metabolic profile DHS | 337 |
| Free T4DHS | 317 |
| Valproic acid DHS | 295 |
| Litium DHS | 266 |
| Hemoglobin A1CDHS | 175 |
| Liver Profile | 170 |

| Madison State Hospital | Volume |
|---|---|
| CBC (Includes Diff/PLT) | 1161 |
| Comprehensive metabolic PA | 538 |
| Lipid Panel | 428 |
| Thyroid Stimulating Hormone | 371 |
| T4 (Thyroxine), FREE | 311 |
| Valproic Acid | 279 |
| Urinalysis, culture if IN | 199 |
| T3 Uptake | 190 |
| Lithium | 166 |
| Hemoglobin A1C | 176 |

| Richmond State Hospital | Volume |
|---|---|
| CBC Auto Diff DHS | 814 |
| Lipid Profile DHS | 786 |
| Comp metabolic profile DHS | 463 |
| TSH, 3rd generation DHS | 414 |
| Basic metabolic profile DHS | 408 |
| Free T4DHS | 386 |
| Valproic acid DHS | 323 |
| Litium DHS | 320 |
| Gamma GTP | 319 |
| Urinalysis Reflex Culture (UA/C&S) | 255 |

| Laure Carter State Hospital | Volume |
|---|---|
| CBC with Automated Differential | 610 |
| Metabolic Panel, Comprehensive | 178 |
| Thyroid Stimulating Hormone, Sensitive | 143 |
| Lipid Panel | 130 |
| Metabolic Panel, Basic | 102 |
| Lithium, Serum or Plasma | 99 |
| T4, Free | 93 |
| Drug Screen 10, Urine | 84 |
| Hemoglobin A1C | 81 |
| Urinalysis, Routine, w/Culture (Includes Colony Count) and Susceptibility if Indicated, Clean-Catch-Greater than 2 Years | 61 |

2.3 **Minimum Deliverables**

The following items listed below have been determined to be requirements by the State of Indiana for the purposes of this RFI. Should the respondent have an alternative solution or method, please provide a full explanation of the proposed alternative solution or method and it shall be given due consideration.

2.3.1 Provider(s) must be fully licensed and certified by the State of Indiana, as well as the Healthcare Finance Administration (HFA), The Joint Commission (formally known as The Joint Commission on Accreditation of Healthcare Organizations) and The Clinical Laboratory Improvement Amendments (CLIA).

2.3.2 Provider(s) must maintain the Clinical Laboratory Improvement Amendment (CLIA) certification, as mandated by Federal Regulations. Provider(s) must provide, upon request, the Clinical Laboratory Improvement Amendments certification.

2.3.3 Provider(s) must utilize current Joint Commission Standards/National Patient Safety Goals when services are provided by the Provider. Currently, these standards include utilizing two (2) patient identifiers for taking blood samples and other specimens. Lab specimens/containers used for blood & other specimens must be labeled in the presence of the patient.

2.3.4 Provider(s) must be fully HL-7 compliant when the State moves to an automated ordering system. Respondent must agree to collaborate with the hospitals on development and implementation of an automated laboratory ordering system at some point in the future.

2.3.5 Provider(s) must provide availability of laboratory consultation to hospital medical and nursing staff 24 hours per day, seven days per week.

2.3.6 Provider(s) must provide all pertinent laboratory supplies and equipment needed for collection of blood, tissue and other specimens, per OSHA approved sharps standards, at no cost to the State Operated Facilities. These supplies may include but are not limited to: centrifuge, glucometer (optional), gauze, alcohol swabs, band aids, tourniquets, retractable safety needles, as well as vacutainers and holders.

2.3.7 Provider(s) must provide laboratory testing that is required by the hospital for employees and pre-employment candidates at the rates included in the contract proposal. The Provider(s) must agree to provide employee and pre-employment test results separate from the usual method of reporting test results for patients, and must agree to provide separate billing for those tests to the facility.

2.3.8 Provider(s) must identify critical value thresholds that will prompt the lab to report test results by phone to the hospital and be willing to adjust those thresholds in order to accommodate specific State Operated Facility requirements. Critical values must be reported immediately to the designated staff at each facility. STAT test results must be called to the designated unit nurse or physician upon completion of testing.

2.3.9 Provider(s) must provide reports and aggregate data analysis requested by the SOF related to the tests ordered and the results of those tests.

2.3.10 Provider(s) must deliver test result reports to the SOFs within 24 hours following collection of the specimen for all tests that have a process time of less than 12 hours.

2.3.11 Provider(s) must provide a clinical pathologist for consultation at the request of the SOF. The pathologist must also be available to provide in-service training for physicians as requested by the SOF.

2.3.12 Provider(s) must provide, on a monthly basis, an itemized list of all tests ordered by each SOF. This list must delineate the cost of tests ordered by each health care provider. Additionally, this list must identify the patient, date of service, description of tests, and the cost of each test.

## SECTION THREE
## Question/Inquiry Process, Response Content/Submission, and Clarification

### 3.1 RFI Timeline

| Activity | Date |
|---|---|
| Issue of RFI | 07/18/2013 |
| Deadline to Submit Written Questions | 08/02/2013 |
| Response to Written Questions/RFI Amendments | 08/09/2013 |
| Submission of RFI Responses | 08/30/2013 |
| Clarification Requests | TBD |
| Issuance of Lab Services RFP | TBD |

### 3.2 Question and Inquiry Process

All questions/inquiries regarding this RFI, the subsequent RFP, and the details of the lab services requirements should be submitted via email to marobinson@idoa.in.gov by the deadline of 3:00 p.m. Eastern Time on the date listed in Section 3.1. Inquiries are not to be directed to any staff member of the Family and Social Services Administration; such action may disqualify a Respondent from further consideration.

Following the question/inquiry due date, Procurement Division personnel will compile a list of the questions/inquiries submitted by all Respondents. The responses will be posted to the IDOA website. The question/inquiry and answer link will become active after responses to all questions have been compiled. Only answers posted on the IDOA website will be considered official and valid by the State**. No Respondent shall rely upon, take any action, or make any decision based upon any verbal communication with any State employees.**

If it becomes necessary to revise any part of this RFI, or if additional information is necessary for a clearer interpretation of provisions of this RFI prior to the due date for submissions, an addendum will be posted on the IDOA website. If such addenda issuance is necessary, the Procurement Division may extend the due date and time of submission to accommodate such additional information requirements, if required.

### 3.3 Submission Deadline and Location

All responses must be received by the Procurement Division no later than **3:00 p.m. Eastern Time** on the date specified in Section 3.1 of this document. Responses must be sent via email to marobinson@idoa.in.gov with the subject heading "RFI 13-34 Lab Services."

### 3.4 Response Content

To facilitate the timely evaluation of RFI responses, a standard format for submission has been developed and is described in this section. All Respondents are required to format their proposals in a manner consistent with the guidelines described below:

- Each item must be addressed in the Respondent's submission.
- The Transmittal Letter must be in the form of a letter.
- The business and services proposal must be organized under the specific section titles as listed below.
- The electronic copies of the proposal submitted via email should be organized to mirror the sections below.
- Each item, Transmittal Letter, Business Proposal, Service Proposal, must be separate individual electronic files. For documentation, Respondents may also submit copies of the required documents as a single PDF file.

### 3.4.1 TRANSMITTAL LETTER

The Transmittal Letter must address the following topics:

#### 3.4.1.1 Signature of Authorized Representative

A person authorized to commit the Respondent to its representations and who can certify that the information offered in the proposal meets all general conditions including the information requested in Section 2.3.4, must sign the Transmittal Letter. **In the Transmittal Letter, please indicate the principal contact for the proposal along with an address, telephone and fax number as well as an e-mail address, if that contact is different than the individual authorized for signature.**

#### 3.4.1.2 Respondent Notification

Unless otherwise indicated in the Transmittal Letter, Respondents will be notified via e-mail.
It is the Respondent's obligation to notify the Procurement Division of any changes in any address that may have occurred since the origination of this solicitation. The Procurement Division will not be held responsible for incorrect vendor/contractor addresses.

#### 3.4.1.3 Other Information

This item is optional. Any other information the Respondent may wish to briefly summarize will be acceptable.

### 3.4.2 BUSINESS PROPOSAL

The Business Proposal must address the following topics.

#### 3.4.2.1 General (optional)

This section of the business proposal may be used to introduce or summarize any information the Respondent deems relevant or important to the State's successful acquisition of the products and/or services requested in this RFI.

#### 3.4.2.2 Respondent's Company Structure

The legal form of the Respondent's business organization, the state in which formed (accompanied by a certificate of authority), the types of business ventures in which the organization is involved, and a chart of the organization are to be included in this section. If the organization includes more than one product division, the division responsible for the development and marketing of the requested products and/or services in the United States must be described in more detail than other components of the organization.

#### 3.4.2.3 References

The Respondent must include a list of at least **Three (3)** clients for whom the Respondent has provided products and/or services that are the same or similar to those products and/or services requested in this RFI. In addition, the Respondent should provide all certifications that proposed project team members hold in any of the third-party tools listed within the Service Proposal. If the Respondent has had previous contracts with the State, it is required that the State be listed as one of the references. Information provided should include the name, address, and telephone number of the client facility and the name, title, and phone/fax numbers of a person who may be contacted for further information.

#### 3.4.2.4 Authorizing Document

Respondent personnel signing the Transmittal Letter of the proposal must be legally authorized by the organization to commit the organization contractually. This section shall contain proof of such authority. A copy of corporate bylaws or a corporate resolution adopted by the board of directors indicating this authority will fulfill this requirement.

#### 3.4.2.5 General Information

Each Respondent must enter your company's general information including contact information.

#### 3.4.2.6 Experience Serving State Governments

Each Respondent is asked to please provide a brief description of your company's experience in serving state governments and/or quasi-governmental accounts.

#### 3.4.2.7 Experience Serving Similar Clients

Each Respondent is asked to please describe your company's experience in serving clients of a similar size to the State that also had a similar scope. Please provide specific clients and detailed examples.

### 3.4.3 LAB SERVICE PROPOSAL

The Service Proposal must address the following topics:

Responses should describe, in detail, a solution and strategy for providing the deliverables outlined in Section Two of this RFI document. There is no prescribed format for organizing this section of the response; however, Respondents should clearly and concisely address their suggestion for accomplishing the lab service requirements for one, multiple, or all of the State Operated Facilities.

Considerable emphasis should be placed on creating greater efficiency and cost savings. The State is particularly interested in reviewing suggestions on how to achieve the highest levels of efficiency through the consolidation of all lab service operations, while simultaneously providing the most cost savings to the taxpayers.

It is assumed that your organization will assign project personnel that possess the necessary professional skills to providing the deliverable services. Please also include a thorough discussion of these personnel, their organizational structure, and their respective roles.

## 3.5 CLARIFICATION

The State reserves the right to request clarifications on information submitted to the State. The State also reserves the right to conduct discussions, either oral or written, with Respondents. These discussions could include requests for additional information, requests for cost or technical information or revision, etc. Additionally, in conducting discussions, the State may use information derived from proposals submitted by competing Respondents only if the identity of the Respondent providing the information is not disclosed to others. The State will provide equivalent information to all Respondents which have been chosen for discussions. Discussions, along with negotiations with responsible Respondents may be conducted for any appropriate purpose.

Any information gathered through oral discussions must be confirmed in writing.